## FORM D RECEIVED RECEIVED 160 2006

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6) AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

|--|

OMB NUMBER: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response...............16.00

	SEC USE ONL	.Y
Prefix		Serial
	l,	1
		<u> </u>
	Date Received	
	}	1

	_'
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Acquisition of Photonic Products Limited	481
Filing Under (Check box (es) that apply):  Rule 504 Rule 505 X Rule 506 Section 4(6) ULOE  Type of Filing: X New Filing Amendment	- 7
A. BASIC IDENTIFICATION DATA	_
1. Enter the information requested about the issuer	<u> </u>
Name of Issuer ( Check if this is an amendment and name has changed, and indicate change.)  StockerYale, Inc.	_
Address of Executive Offices (Number and Street, City, State, Zip Code)  32 Hampshire Road, Salem, NH 03079  (Number and Street, City, State, Zip Code)  603-893-8778	•
Address of Principal Business Operations (Number and Street; City, State, Zip Code)  Telephone Number (Including Area Code)	
Brief Description of Business	
Designs and manufactures structured light lasers and related technologies.  06062969	
Type of Business Organization	-  '
X corporation	
□ business trust □ limited partnership, to be formed	- וובן
Actual or Estimated Date of Incorporation or Organization:  Jurisdiction of Incorporation or Organization:  (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)  GENERAL INSTRUCTIONS  Federall	CESS
GENERAL INSTRUCTIONS	™ / 200
reuciai:	<i></i>
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 23 FIMA et seq. or 15 U.S.C. 77d(6)	INCIAL
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.	
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549	1.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering,	

Filing Fee: There is no federal filing fee.

Part E and the Appendix need not be filed with the SEC.

## State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

	SIC IDENTIFICATION DATA	
<ul> <li>Enter the information requested for</li> <li>Each promoter of the issuer, if the Each beneficial owner having the 10% or more of a class of equity</li> <li>Each executive officer and direct partners of partnership issuers;</li> </ul>	he issuer has been organized within the pale power to vote or dispose, or direct the securities of the issuer; etor of corporate issuers and of corporate	ast five years; vote or disposition of, general and managing
• Each general and managing part	ner of partnership issuers.	
Check Box(es) that Apply: X Director	☐ Promoter ☐ Beneficial Owner ☐ General and/or Managing Partner	☐ Executive Officer
Full Name (Last name first, if individua Zupan, Mark	al)	
Business or Residence Address	(Number and Street, City, State, Zip Co	ode)
32 Hampshire Road, Salem, NH 0307		
Check Box(es) that Apply: X Director	☐ Promoter X Beneficial Owner ☐ General and/or Managing Partner	X Executive Officer
Full Name (Last name first, if individua Blodgett, Mark		
Business or Residence Address	(Number and Street, City, State, Zip Co	ode)
32 Hampshire Road, Salem, NH 0307		
Check Box(es) that Apply:  □ Director	☐ Promoter X Beneficial Owner ☐ General and/or Managing Partner	☐ Executive Officer
Full Name (Last name first, if individua	al)	
The Eureka Interactive Fund Limite Business or Residence Address	d (Number and Street, City, State, Zip Co	ode)
The Adelphi, 13th Floor, 1/11 John St	reet London England WC2N6HT	•
Check Box(es) that Apply:	□ Promoter □ Beneficial Owner □ General and/or Managing Partner	X Executive Officer
Full Name (Last name first, if individua	al)	
Molleur, Marianne		
Business or Residence Address	(Number and Street, City, State, Zip Co	ode)
32 Hampshire Road, Salem, NH 0307	79	
Check Box(es) that Apply: X Director	☐ Promoter ☐ Beneficial Owner ☐ General and/or Managing Partner	☐ Executive Officer
Full Name (Last name first, if individual Oglethorpe, Raymond	al)	
Business or Residence Address	(Number and Street, City, State, Zip Co	ode)
32 Hampshire Road, Salem, NH 0307	79	
Check Box(es) that Apply:  X Director	☐ Promoter ☐ Beneficial Owner ☐ General and/or Managing Partner	☐ Executive Officer
Full Name (Last name first, if individua		
Zilvitis, Patrick		
Business or Residence Address	(Number and Street, City, State, Zip Co	ode)
32 Hampshire Road, Salem, NH 0307	79	
Check Box(es) that Apply: X Director	☐ Promoter ☐ Beneficial Owner ☐ General and/or Managing Partner	☐ Executive Officer
Full Name (Last name first, if individua Karol, Steven	al)	
Business or Residence Address	(Number and Street, City, State, Zip Co	de)
32 Hampshira Doad, Salam, NH 0305	70	

Check Box(es) that Apply: X Director	☐ Promoter ☐ Beneficial Owner ☐ Executive Officer☐ General and/or Managing Partner
Full Name (Last name first, if individua	0 0
Klenner, Dietmar	
Business or Residence Address	(Number and Street, City, State, Zip Code)
32 Hampshire Road, Salem, NH 0307	9
Check Box(es) that Apply: X Director	☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner
Full Name (Last name first, if individua	al)
Levitan, Ben	
Business or Residence Address	(Number and Street, City, State, Zip Code)
32 Hampshire Road, Salem, NH 0307	
Check Box(es) that Apply:	☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner
Full Name (Last name first, if individua	aD
	·- <b>,</b>
Business or Residence Address	(Number and Street, City, State, Zip Code)
Check Box(es) that Apply:	☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner
Full Name (Last name first, if individua	
run Name (Last name 111st, 11 murviuua	,
Business or Residence Address	(Number and Street, City, State, Zip Code)
:	
Check Box(es) that Apply:	☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ General and/or Managing Partner
Full Name (Last name first, if individua	ıl)
-1	·
Business or Residence Address	(Number and Street, City, State, Zip Code)

:			<b>B.</b> 1	INFOR	MATIO	N ABO	UT OFF	ERING				
1. Has th	e issuer	sold, or	does the	issuer i	ntend to	sell, to r	non-accr	edited ir	vestors i	n this	Yes	No
offering?						, • • •						X
		An	swer als	o in App	endix, C	Column 2	2, if filin	ig under	ULOE.			
2. What	is the mi	nimum i	nvestme	nt that v	vill be ac	cepted f	from any	,				NT/A
individua	17	••••••		••••••	••••••	•••••	•••••	••••••		• • • • • • • • • • • • • • • • • • • •		<u>N/A</u>
4											Yes	No
3. Does t						ngle					_	v
						• • • • • • • • • • • • • • • • • • • •	•••••					X
<ol><li>Enter the remuneration</li></ol>												similar ited person or
agent of a bropersons to be	oker or deale	er registered	d with the S	EC and/or	with a state	or states, I	ist the name	e of the bro	ker or dealer	r. If more	than fi	ve (5)
Full Name (L				ich a bloke	i oi dealer,	you may se	t total the t	mormanon	tor that bro	Kei oi de	aici Oiny	•
N/A		·										
Business or I	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip (	Code)						
Name of Ass	ociated Bro	ker or Deale	er									
[												
States in Wh							······································					
(Check " [AL]	'Ali State" o [AK]	r check ind [AZ]	ividual Sta [AR]	tes) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	 1H1	
[IL] <sup>[</sup>	[N]	[/u2] [[A]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	[NE]	[NV]	[NH]	[נא]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	
[RI],	[SC]	[SD]	[TN]	[TX]	. , [UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY	
Full Name (L	ast name fir	rst, if indivi	idual)									
Business or I	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
1												
Name of Ass	ociated Bro	ker or Deale	er									
1												
States in Wh									************		г	□ All States
(AL)	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[H]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	J [MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	. [WA]	[WV]	[WI]	[WY	] [PR]
Full Name (I	ast name fi	rst, if indivi	idual)									
<u>i</u>												
Business or I	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip (	Jode)						
i	1.15											
Name of Ass	octated Bro	ker or Deal	er									
Ca-a: 11"	iak Dares -	Sand March	Paliale - 4	Inter 3- 4	Caliais Do							
States in Wh (Check "	ich Person L 'All State" o										C	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[Н]	• •
[IL]*	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	
[MT]	(NE)	[NV]	(NH)	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	
1011	10.71	16121	TIMI	TTV1	1[111]	IVII	IVAI	13// 6 1	14/1/	LWII	11A/V	, ipul

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	*1	\$
	Equity	2,680,311 shares	2,680,311 shares
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)	2,375,000 share	s 2,375,000 shares
	Partnership Interests	. <b>S</b>	\$
	Other (Specify)	<b>s</b>	s
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		<u></u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchase on the total lines. Enter "0" if answer is "none" or "zero."	es Number Investors	Aggregate Dollar Amount of Purchases
		nivesiois	or r drendses
	Accredited Investors	·	
	Non-accredited Investors	·	. s
			_
	Total (for filings under Rule 504 only)	·	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	. If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of	Dollar Amount
	Rule 505	Security N/A	Sold <b>\$</b> N/A
	Regulation A		\$ N/A
	Rule 504		\$ N/A
	Total		
1	a. Furnish a statement of all expenses in connection with the issuance and distribution of the	14/71	<u> </u>
٠,	securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	•••••	<b>- \$</b>
	Printing and Engraving Costs		
	Legal Fees	***************************************	X \$100,000.00
	Accounting Fees		<b>\$</b>
	Engineering Fees		□ \$
	Sales Commissions (specify finders' fees separately)		□ \$
	Other Expenses (identify)		
	Total		X \$100,000.00

	1 and total expenses furnished in re	ggregate offering price given in response to Part C - Question sponse to Part C - Question 4.a. This difference is the ser."		-		\$ <u>0.00</u>
uso	ed for each of the purposes shown.  imate and check the box to the left	isted gross proceeds to the issuer used or proposed to be If the amount for any purpose is not known, furnish an of the estimate. The total of the payments listed must equal are set forth in response to Part C - Question 4.b above.				
				Payments to Officers, Directors, & Affiliates	1	Payments To Others
	Salaries and fees			<b>S</b>		\$
	Purchase of real estate			<b>\$</b>		\$
•	Purchase, rental or leasing and in	stallation of machinery and equipment		\$		\$
ř	Construction or leasing of plant b	uildings and facilities		<b>s</b>		\$
1	offering that may be used in exch	ncluding the value of securities involved in this ange for the assets or securities of another	_	¢	_	•
	•			s		
				s		<b>s</b>
	<u> </u>			s		s
	Other (specify):		u	<b></b>	_	<b>4</b>
				\$		<b>s</b>
				s	0	\$
	Total Payments Listed (Column t	otals added)		□ \$ <u>0.00</u> *2		
	FOOTNOTES:					
	1. Additional securities were is	sued by StockerYale (UK) Limited, a company organized un	ider tl	e laws of Engl	and	and Wales.
	2. StockerYale (UK) Limited, s acquisition of Photonic Produc	a company organized under the laws of England and Wales, ts Limited and for working capital.	receiv	ed proceeds us	ied f	or the
		D. FEDERAL SIGNATURE				
. II	ouden eigenture constitutes en und	be signed by the undersigned duly authorized person. If this no leriaking by the issuer to furnish to the U.S. Securities and Exch by the issuer to any non-accredited investor pursuant to paragraphy.	unge (	onunistion, op	on 4	5, the nitten reques
ıer	(Print or Type)	Signature		Date		
oc	kerYale, Inc.			11-14	<u> </u>	06
	of Signer (Print or Type)	Title of Signer (Prilt or Typt) Chief Figure Al Officer				